

Phone: 406.444.2040 800.332.6148 Fax: 406.444.3497 www.csimt.gov

APPLICATION FOR CROWDFUNDING EXEMPTION Pursuant to Montana Code Annotated Section 30-10-105(22)

Please fill out this form and submit it with a \$50.00 filing fee to:

Office of the Montana State Auditor Commissioner of Securities & Insurance Securities Department 840 Helena Avenue Helena, MT 59601 (406) 444-2040

Name of Issuer:	
Address of Issuer:	
Phone Number:	
	uer intend on soliciting others while relying on the Montana Crowdfunding Please circle one and note the time filing requirements)
YES:	This application must be fully completed and filed within 10 days prior to any solicitation.
NO:	This application must be filed <u>no later than 15 days after the first sale</u> of the security.
2. Date sales ar	re to begin or the date of first sale if no general solicitation was used:
(Offerings ma	of funds expected to be raised by this offering: ay not exceed \$1,000,000, less any amount received for sales of the issuer's the preceding twelve months)
4. Name of Ban	k or Depository Institution in which investor funds will be deposited:

5. Please provide the following for all persons involved in the offer or sale of sec behalf of the issuer (use another page if more space is necessary):	curities on
1. Name:	
Position:	
Address:	
Phone:	
Email:	
2. Name:	
Position:	
Address:	
Phone:	
Email:	
3. Name:	
Position:	
Address:	
Phone:	
Email:	
4. Name:	
Position:	
Address:	
Phone:	
Email:	
6. Please provide the following if the issuer intends to pay any type of compensa directly or indirectly, to an agent or broker-dealer or any other person for the these securities:	
Name of Broker-dealer Firm:	
Agent Name:	
CRD #	
Phone:	
Email:	
7. Will the issuer use a disclosure document in connection with the offers or sale	s?
8. Please summarize the business of the issuer:	

- 9. Is the issuer, before or after the offer or sale, an investment company as defined in section 3 of the Investment Company Act of 1940, 15 U.S.C. 80a-3, or subject to the reporting requirements of section 13 or 15(d) of the Securities Exchange Act of 1934, 15 U.S.C. 78m and 78o(d)? (Circle One) YES NO
- 10. Is the issuer, before or after the offer or sale, an investment adviser as defined in the Montana Securities Act or a person who otherwise provides investment advice as a service or for a fee? YES NO
- 11. Is the issuer, before the offer or sale, an individual who has been convicted within 10 years before the sale, or 5 years in the case of issuers, their predecessors, and affiliated issuers, of a felony or misdemeanor? (Circle One If you answer YES, please submit an explanation)
 YES NO
- 12. Is the issuer, before or after the offer or sale, a person subject to a final order issued by a state or federal securities regulator, state or federal banking authority, or state insurance commissioner, or other similar entity, that bars the person from the business of securities, insurance, or banking? (Circle One If you answer YES, please submit an explanation)
 YES NO

NOTE: The Issuer cannot accept more than \$10,000 from a buyer unless the buyer is an accredited investor under

Rule 501, Regulation D, 17 CRF 230.501

The omission of a material fact or misstatement of a material fact to investors constitutes a	
violation of the Securities Act of Montana, giving rise to administrative, civil or criminal liabiliti	ies.

Your signature below confirms that all answers contained herein are true and accurate

DATED this day of	, 20
Signature	
Printed Name	
Title	



Monica J. Lindeen Commissioner of Securities & Insurance Montana State Auditor 840 Helena Ave Helena, MT 59601

Phone: 406.444.2040 800.332.6148 Fax: 406.444.3497

www.csimt.gov

UNIFORM CONSENT TO SERVICE OF PROCESS

KNOW ALL PEOPLE BY THESE PRESENTS:

That the undersigned	
State of	is, hereby irrevocably appoints the Montana rney in the State of Montana upon whom any action or proceeding against it arising or out of violation of the aforesaid laws of reby consent that any such action or curt of competent jurisdiction and proper e officers so designated with the same effect or the laws of that State and have been occess or pleading served hereunder be
Name	
Address	
Dated this day of, 20	
Ву:	
Title:	
Ву:	
Title:	
INDIVIDUAL OR PARTNERSHIP	P ACKNOWLEDGMENT
State of) County of, 20, before the undersigned officer, personally appeared known and known to me to be the same person(s) whose instrument, and acknowledged the execution thereof for the transfer of the control of th	ore me,, to me personally name(s) is (are) signed to the foregoing the uses and purposes therein set forth.
Notary Public/Commissioner of Oaths My Commission Expires (SEAL)	